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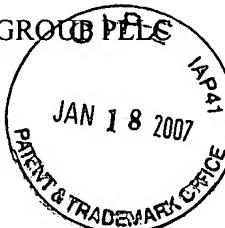
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38106 7590 10/19/2006

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01/23/2007 BABRAHAZ 00000050 10743564

01 FC:1501 1400.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 6.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/743,564	12/22/2003	Nicolas Rougnon-Glasson	852263.410	5047

TITLE OF INVENTION: DEVICE FOR TRANSFERRING DATA BETWEEN TWO ASYNCHRONOUS SUBSYSTEMS HAVING A BUFFER MEMORY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/19/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
PEYTON, TAMMARA R	2182	710-052000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	1 <u>Lisa K. Jorgenson</u> 2 <u>Robert Iannucci</u> 3 <u>Seed IP Law Group PLLC</u>

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

STMicroelectronics S.A.

Montrouge, France

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

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- Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 2

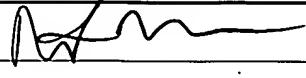
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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-1090 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Date January 18, 2007Typed or printed name Robert IannucciRegistration No. 33,514

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